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Bib Data Sheet

CONFIRMATION NO. 7474

SERIAL NUMBER 10/797,813	FILING DATE 03/10/2004 RULE	CLASS 514	GROUP ART UNIT 1641	ATTORNEY DOCKET NO. 2417-1-012
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APPLICANTS

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** CONTINUING DATA ***** *NONE ug*

** FOREIGN APPLICATIONS ***** *NONE ug*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **
 ** 05/26/2004

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY NY	SHEETS DRAWING 0	TOTAL CLAIMS 36	INDEPENDENT CLAIMS 11
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Verified and Acknowledged
 Examiner's Signature: *[Signature]* Initials: *ug*

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 23565
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TITLE
 Methods of assessing the need for and the effectiveness of therapy with antioxidants

FILING FEE RECEIVED 1036	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____
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